

Departmental Evaluation Plan

July 1, 2001 - June 30, 2004

Office of Strategic Finance

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Wisconsin Department of Health and Family Services

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Madison, Wisconsin

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Introduction

The Department of Health and Family Services Evaluation Plan represents an effort by the Department to systematically identify and plan for performance measurement and program evaluation studies that are a priority to the legislature and the Department. It includes evaluations mandated by the legislature, those required by federal waiver, and those requested by the Department Secretary and division administrators. This plan describes performance measurement and program evaluation studies that will be conducted July 1, 2001 through June 30, 2004. It is anticipated that Departmental Evaluation Plans will also be developed for subsequent 2-year periods.

The purposes of the plan are to:

- Identify and prioritize evaluation studies.
- Lend direction to departmental evaluation efforts by providing a clear evaluation agenda and work plan.
- Inform Department staff and other interested persons of the nature and content of the Department's evaluation agenda.
- Assure that evaluation studies are completed in time in order to feed into legislative, federal waiver, budgetary and other processes in an orderly manner.
- Assure that evaluation resources are effectively utilized and provide public accountability for evaluation efforts.

This plan includes evaluations that will be conducted by the Office of Strategic Finance, evaluations that will be conducted by other staff in the Department, and contracted evaluations. However, the plan is not intended to represent all Department-level evaluation efforts or to be a comprehensive listing of all Department evaluation activities. Clinical research at the Department's institutions, for example, is not included.

The plan also must provide the flexibility to incorporate additional high-priority, legislatively-mandated, and federal waiver evaluations as they are identified over the next two years, as well as the flexibility to delete planned evaluations as additional studies are identified and as program and evaluation priorities change. Study designs will be developed for the evaluations that will be conducted by the Office of Strategic Finance evaluation section. These study designs will include specific study objectives, more specific and intermediate due dates for study products, and specific study methodologies for conducting the evaluations. As a result, it may be advisable to substantially redirect, substitute for, or drop a study if the issues have changed, if the need for the study has diminished, or if a suitable methodology cannot be developed.

The program evaluation studies included in this plan are presented in six categories: long-term care, children and family services, institution services, supportive living services, Medicaid, and public health programs. Most of the evaluations included in the long-term care category reflect Department efforts to assess the early impact of initiatives to redesign the state's long-term care system. A number of these efforts, which began in the previous Departmental Evaluation Plan period, are contracted evaluations in support of federal waivers. The plan also includes a number of evaluations focusing on the effectiveness of new approaches to child welfare services; initiatives to prevent violence, substance abuse, teenage pregnancy and related problems; as well as efforts to provide community and institution

services for persons with disabilities, substance abuse or mental health needs. The public health evaluations included in this plan reflect state and federal evaluation requirements and the continuation of efforts to evaluate public health prevention programs resulting from a review of prevention programs by the Legislative Audit Bureau. This Departmental Evaluation Plan also includes evaluations for two significant program initiatives: Badger Care and the Mental Health/AODA Managed Care Demonstration. The Badger Care evaluation will provide feedback on the impact of efforts to provide health insurance to children and families and increase their access to needed health services. The evaluation of the Mental Health /AODA Managed Care Demonstration will evaluate participant outcomes resulting from efforts to change the way in which mental health services are delivered.

Persons who have questions about the evaluation studies described in this plan are invited to contact the Office of Strategic Finance Evaluation Section. A copy of the evaluation plan and a description of the services provided by the Office of Strategic Finance Evaluation Section can be found at the Department's Internet site:

<http://www.dhfs.state.wi.us/aboutDHFS/osf/Evaluation/osf-eval.htm>.

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Evaluation Plan Studies

Performance Measurement

Health and Well-Being Report

The purpose of the Health and Well-Being report is to provide performance outcome information that can be used for program monitoring and management. This report is produced annually. The 2001 report will contain trend data from 1990 on measures under four categories – population/health status and access, women and children, youth and elderly/disabled. Comparisons to the U.S. will also be made. It is expected that the 2001 report will be available in October 2001. The first Health and Well-Being Report was issued in 2000.

Performance Scorecard Report

The purpose of the Performance Scorecard Report is to routinely provide outcome data for Department programs. The intent of outcome monitoring is to improve program management through the use of performance measures. The Scorecard Report is an ongoing effort that is updated annually. Over 20 Department programs will be included in the 2001 report, representing all Department program divisions. Each scorecard includes a one-page summary that presents several indicators of program effectiveness, efficiency and responsiveness. It is expected that the 2001 report will be completed by February 2002.

Policy Research and Analysis

Wisconsin Health Expenditures

The purpose of this analysis is to provide an overview in graph form of Wisconsin's health expenditures that can be used to monitor how the health dollar is being spent regardless of payer. The analysis includes health expenditures unadjusted and adjusted for price inflation and population growth, expenditures by major provider group, expenditures by public payer and expenditures as a percent of gross state product. This report is updated periodically. The first report was issued December 2000.

Program Evaluation

Long-Term Care

Bridges to Work

The goal of the Bridges to Work Initiative is to increase the extent to which existing programs and policies work together to create a stronger consumer-centered safety net in support of individuals who have disabilities and who are pursuing employment goals.

The Department requested \$1,994,265 from the federal Health Care Financing Administration for a 4-year period to fund this initiative. Three evaluations are anticipated for the Bridges to Work Initiative. These include evaluations of the attendant care pilot, the disability determination process and statewide integration

These evaluations, which will be conducted by staff contracted by the Center for Delivery Systems Development in OSF through the UW Waisman Center, are required by the Health Care Financing Administration as a condition of funding. It is anticipated that evaluation reports will be issued over the duration of the project, with the final report issued in 2004.

Family Care Program

Family Care is a pilot program that redesigns the long term care system for the elderly and disabled to provide services using a managed care service delivery model. The study will evaluate the impact of Family Care on access to, and quality of, long term care services and will also evaluate the cost effectiveness of the program. The Department obtained a waiver from the Federal government in order to use Medical Assistance funds to implement this pilot program. State statutes and the US Department of Health and Human Services require that this evaluation be conducted by an independent evaluation agency.

The evaluation has been contracted to the Lewin Group, which is an evaluation firm from Virginia. A legislatively mandated Family Care implementation report was issued in November 2000. This report will be used to assess the feasibility of statewide implementation of Family Care. The final impact evaluation and cost benefit waiver report is to be completed by September 30, 2002.

Medicaid Purchase Plan

Wisconsin implemented the Medicaid Purchase Plan on March 15, 2000. It provides an additional Medicaid eligibility category that offers people with disabilities who are working or interested in working, the opportunity to purchase health care services by paying a monthly premium, based on income. Slightly over one-fourth of the initial enrollees in this program were required to pay a premium. A comprehensive 3-year evaluation of the Medicaid Purchase Plan has been contracted to a three-member consortium including Meridian Resource-Innovative Resource Group, EDS and The

Management Group (TMG). This evaluation is required by state legislation. The evaluation will provide demographics about participants. It also will include:

- an impact evaluation examining the effects on participants' earnings and employment, health care choices and savings patterns;
- a process evaluation to determine if the program was implemented efficiently and effectively across the state; and
- a fiscal evaluation to evaluate the effects of the plan on federal, state, and local funding.

The evaluation is expected to be completed in June 2003.

Partnership Federal Waiver Program

The Partnership Program started as a demonstration project in 1994 funded through a grant by the Robert Wood Johnson Foundation. The Department received a federal Medicaid/Medicare waiver that enables the program to integrate all long-term care and acute care services to the elderly and disabled in a way that improves quality and achieves cost savings. The program will be evaluated focusing on four broad areas: the effect of the Partnership Program on the coordination of care and benefits, the utilization of services, patient outcomes including satisfaction, and costs.

The University of Minnesota is conducting the evaluation under contract with the federal Health Care Financing Administration. The evaluation is to be completed in 2003.

Pathways to Independence

The purpose of this evaluation is to assess the implementation and impact of Pathways to Independence, a research and demonstration project intended to reduce barriers to employment for disabled people, including those with physical disabilities, mental illness, HIV, and developmental disabilities. The study is examining the implementation of the project, as well as its effectiveness in increasing employment, earnings, savings and other measures of self-sufficiency among participants, and decreasing their reliance on government aid. The evaluation is also studying the project's impact on the vocational services system, including the development of improved access to resources, cost-effectiveness, and participant attitudes and satisfaction. The Center for Delivery Systems Development is coordinating this evaluation.

The lead evaluators in the study are consulting staff contracted by the Center for Delivery Systems Development and an additional contractual consultant, the Oregon Health Policy Institute. The evaluation is required by the Social Security Administration and by the Robert Wood Johnson Foundation, which are funding the project. The evaluation will be completed by September 2003.

Resource Center Prevention Grants

Resource center pilots in Jackson, Marathon, Milwaukee and Trempealeau counties received special funding for 2000 and 2001 to support prevention activities to help prevent disability, improve functioning and lessen the need for long term care. The projects are using a variety of approaches to achieve these goals.

The project in Jackson County focuses on preventing falls through in-home assessments, exercise and training as well as community-based exercise and safety education. The project is being evaluated by UW- LaCrosse and Jackson County Aging and Disability Resource Center. Findings will be available in February 2002.

The project in Marathon County includes in-home assessments and follow-up visits by a gerontological nurse practitioner. This project is being evaluated by the North Central Health Care and by UW Madison, Medical School. Evaluation findings are expected to be available February 2003 at the end of the three-year project.

Milwaukee County's project is assessing three intervention strategies: 1) a computer-based health risk assessment and internet-based health and fitness education, 2) individual fitness assessments by a trained exercise physiologist and access to equipment and structured workout time and 3) print information. Assessment of participants' change in physical fitness, attitudes and functionality will be compared to changes in a group of similar persons not receiving these services. Milwaukee County Aging Resource Center and UW-Milwaukee are conducting the evaluation. Evaluation findings will be available February 2002.

In Trempealeau County, nutrition counseling, personal health planning and other support services such as transportation are being provided. The project is being evaluated by the Trempealeau County Social Services Department and the Aging and Disability Resource Center of Trempealeau County. The evaluation includes measuring nutritional health of recipients and the benefits to project volunteers. Evaluation findings will be available February 2002.

Children and Family Services

Chafee Independent Living Program

The Chafee Foster Care Independence Act of 1999 modified the Independent Living Program for youth in foster care to require that transitional services be provided to youth ages 18-21 who have aged out of foster care. The federal government will require states to track program outcomes and will establish program performance standards.

Wisconsin will participate in a multi-state evaluation of Chafee Independent Living Program outcomes with Illinois, Iowa and Missouri. The evaluation will collect information on outcomes in the areas of employment, education, housing and other

measures of well-being and economic self-sufficiency through a series of interviews with youth and their case managers. The evaluation is being conducted under contract with the University of Chicago, Chapin Hall School of Social Work. It will take place over a 5-year period beginning in 2001 with a final report in 2005.

Childcare Provider Closures

This study will collect information and evaluate reasons for closure of childcare providers and how this affects provider licensing by the Division of Children and Family Services. The Bureau of Regulation and Licensing, which is responsible for licensing childcare providers in the state, requested the study. Provider closure creates instability in local childcare services and is disruptive to working parents who depend on childcare providers to care for their children. Analyzing the reasons for provider closure will allow the Bureau of Regulation and Licensing to provide more technical assistance to providers and improve the stability of childcare services.

The Office of Strategic Finance Evaluation Section will conduct the study. A completion date for the study will be identified when the study design is finalized.

Milwaukee Child Welfare

DHFS assumed responsibility for Milwaukee Child Welfare services in 1998. The Milwaukee child welfare service system implemented in 1998 includes safety and out-of-home care service components. The new service system is designed to address the deficiencies of the prior county child welfare service system, which experienced high rates of repeat maltreatment of children and long stays in foster care.

The Division of Children and Family Services has contracted with the University of Wisconsin-Milwaukee, School of Social Welfare to conduct an evaluation of the state-operated child welfare program in Milwaukee County. The primary issue to be addressed in the evaluation is whether children and families served are receiving timely and appropriate assessments and services. The evaluation will also examine outcomes such as repeat instances of maltreatment, placement stability for children in out-of-home care, permanency measures and measures of well-being for children placed out of their homes. The evaluation is expected to be completed by UW-Milwaukee in 2002.

Safe and Stable Families (formerly Family Preservation and Support)

The Safe and Stable Families (SSF) program is operated through contracts with counties and tribes and offers Family Support, Family Preservation and Family Reunification services to families who are at risk or have become involved with the child welfare program. Federal requirements specify that SSF funds must be used for each of the three types of services.

The purpose of this evaluation is to assess the effectiveness and impact of selected SSF programs in Wisconsin. The study will collect, analyze and assess outcome data from

seven SSF initiatives in four counties, and will also describe the organizational and collaborative changes that have resulted from county SSF activities. SSF activities are designed to increase parental competency (thereby preventing family crises), resolve existing family crises (thereby preventing out-of-home placements of children unless absolutely necessary), and promote the reunification of families where an out-of-home placement has occurred. The Office of Strategic Finance Evaluation Section is conducting the evaluation. The evaluation will be completed in May 2002.

Shared Family Care Waiver

Shared Family Care (SFC) is an IV-E foster care demonstration project for which DCFS is seeking a 5-year, federal IV-E waiver. Under the SFC project, the host foster parents will be trained to work with both parents and children to facilitate reunification of the family. The host families will care for children and serve as mentors to the parents, with host families providing either residential or nonresidential assistance to the parents. The waiver will be implemented in Milwaukee by Innovative Family Partnerships, Inc., with the potential to be expanded.

The project is being implemented in June 2001 with the waiver request being submitted for a July 2001 effective date. An independent evaluation is required under the waiver, and the University of Wisconsin-Milwaukee School of Social Welfare has been selected to do the process and outcome portions of the evaluation under contract. The evaluation is expected to start in the summer of 2001. The Office of Strategic Finance Evaluation Section will conduct the cost benefit component of the evaluation.

Institution Services

Intensive Treatment Units

The Division of Care and Treatment Facilities created beds within the Center system to provide short term intensive treatment to individuals with developmental disabilities and mental health issues or behavioral challenges. These are referred to as the Excell unit at Northern Center and as the Intensive Treatment Program at Southern Center. A third unit being developed for Central Center will bring the total number of beds in the system to 50. These beds were created to relieve the counties of a fiscal burden for people with lengthy stays who remained at mental health institutes and had reached maximum benefit of hospitalization. With the creation of these beds, counties were charged back for the state's share for the cost of care. Evaluation is requested to determine if the program is being implemented as initially expected, the type of data that should be collected routinely to monitor the program, and the barriers, if any, that prevent the units from meeting their treatment and discharge goals.

Office of Strategic Finance Evaluation Section staff will conduct this evaluation. A completion date for the evaluation will be identified when the evaluation study design is finalized.

Wisconsin Resource Center

The Wisconsin Resource Center (WRC) provides mental health treatment and custody to inmates referred by the Department of Corrections. WRC also provides residential treatment for Chapter 980 patients (civilly committed sexual offenders.) As WRC transfers the Chapter 980 patients to the new Sand Ridge Secure Treatment Center, the Division of Care and Treatment Facilities is committed to developing new and updated programming for the growing population of correctional inmates. This evaluation is requested to develop methods to monitor program implementation and program outcomes to provide a feedback loop to allow for ongoing evaluation of the effectiveness of programming. Initial efforts will concentrate on identifying indicators to assess implementation. To assess the effectiveness of programs, the Division of Care and Treatment Facilities also requests assistance in collecting and summarizing information on post discharge adjustment.

The Office of Strategic Finance will conduct this evaluation in cooperation with the Division of Care and Treatment Facilities, WRC staff. A report on program effectiveness should be issued by early calendar year 2003.

Supportive Living Services

AODA Treatment Program for Women and TANF- Eligible Families, Outcome Study

The purpose of this evaluation is to assess the implementation of AODA treatment services specifically designed for women and for low income families eligible for Temporary Assistance for Needy Families (TANF) who have alcohol and other drug abuse problems, and to assess program impact on client outcomes. This study will analyze system outcome measures and client outcome measures collected by local projects. Client outcomes to be analyzed include improvement/recovery from substance abuse; improvement in parenting, family functioning and wellness; reduced involvement with the criminal justice system; and improvement in mental health, basic living skills, and education/vocational outcomes. 1999 Wisconsin Act 9 provides funding for grants to local projects and requires each grant program to evaluate client outcomes.

The University of Wisconsin is conducting an evaluation of the project in Milwaukee. The Office of Strategic Finance is providing assistance to the Division of Supportive Living, Bureau of Substance Abuse Services to evaluate the projects in the balance of the state. It is anticipated that the evaluation of projects in the balance of the state will be completed by June 30, 2002.

AODA Treatment Program for Women and TANF-Eligible Families, Cost Benefit Study

Women's AODA TANF projects are funded to meet the special needs of women and TANF-eligible families with alcohol or other drug abuse problems. Funding for these projects is provided from the AODA Block Grant and TANF for the balance of the state and from TANF funds for the projects in Milwaukee County. DHFS has requested GPR funds to support these projects in the future. Currently the program is a cooperative effort on the part of the Department of Workforce Development and DHFS. This cost benefit evaluation is requested to supplement the efforts underway, which include evaluating project outcomes in specified areas and compiling project reports regarding best practices.

An interdepartmental work group has been established to plan the cost benefit study. Office of Strategic Finance Evaluation Section staff will provide consultation and technical assistance to Division of Supportive Living, Bureau of Substance Abuse Services staff who will conduct the study. This evaluation is expected to start in mid 2001.

Community Support Program Cost Comparison

The Community Support Program provides intensive programming and services to seriously mentally ill people in order to maintain them in the community. Most counties operate a Community Support Program. The purpose of this evaluation is to assess the cost-effectiveness of the Community Support Program. In addition, the evaluation will assess the impact of the program on several other outcomes such as correctional system involvement and employment. The exact outcomes will be determined as part of the development of a study design. It is anticipated that the study will track a population of recent admissions to determine their overall mental health service utilization patterns and other outcomes before and after Community Support Program admission.

Office of Strategic Finance Evaluation Section staff will provide assistance in analyzing information for this study. A completion date for this evaluation will be specified when the study design is finalized.

Integrated Services Projects

Integrated Services Projects (ISPs) are intended to link multiple services (education, child welfare, juvenile justice and institutional and community-based services) for children with severe emotional disturbance through a wraparound approach. Twenty-nine counties now have ISPs, and 21 of them are small projects. This evaluation would assess the impact of the program using a control group comparison with children not served in ISPs. The evaluation is requested to help with program development and improvement, quality improvement and quality assurance, and internal accountability at state and local levels. Specifically it is hoped that the evaluation findings will help the program better

adapt the wraparound/ISP model to different regions of the state with different service system environments and to justify further expansion of the models to cover the whole state.

The Bureau of Community Mental Health requested technical evaluation assistance from the Office of Strategic Finance Evaluation Section related to improving data collection instruments, sampling techniques, statistical analysis and reporting to implement this evaluation. A completion date for the evaluation will be specified when the study design is finalized.

Life Span Respite Care Program

The purpose of this evaluation is to determine if additional resources provided for respite care are effective in increasing access to respite care services for family caregivers and persons with special needs. This evaluation will assess whether local respite care projects are implemented as intended, will assess the extent to which local respite care projects are able to coordinate with other long term care programs, and will analyze client/family satisfaction with respite care services. 1999 Wisconsin Act 9 provides grant funds for the development of life-span respite care projects around the state and requires that the projects be evaluated.

The Respite Care Association of Wisconsin is conducting this evaluation. It will be completed by June 1, 2004.

Mental Health/AODA Managed Care Demonstration

The purpose of this evaluation is to assess the implementation and impact of the Mental Health/AODA Managed Care Demonstrations. The first phase of the evaluation will assess whether the demonstrations were implemented as intended, including a study of enrollment issues, and implementation problems and solutions. The second phase of the evaluation will assess the impact of the demonstrations on participant outcomes. Participants include mental health/AODA consumers, service providers, and agencies. Examples of consumer outcomes include access, well being, satisfaction and recovery. Provider and agency outcomes such as satisfaction, turnover and expenditures will also be assessed.

The evaluation will be based on a plan developed by the Office of Strategic Finance, the Division of Supportive Living, and the Division of Health Care Financing. The Department will contract with an independent evaluator to conduct this evaluation. The implementation evaluation report will be completed by February 1, 2003. The impact evaluation report will be completed by April 1, 2004.

Repeat Intoxicated Driver Act

1999 Wisconsin Act 109 requires the departments of transportation, corrections and health and family services to jointly study and evaluate alternatives to incarceration for repeat operating while intoxicated (OWI) driving offenses. A report is required by October 1, 2001. 1999 Wisconsin Act 109 also requires the departments of transportation, and health and family services to jointly study and evaluate the effectiveness of using ignition interlock devices and vehicle immobilization as methods of reducing the prevalence of drunk driving and the recidivism of drunk-driving offenders. The report on ignition interlock devices and vehicle immobilization is required by February 1, 2004.

The Department is currently working with the departments of corrections and transportation to plan these evaluations.

SSI and Caretaker Supplement Benefits

The SSI program distributes approximately \$13 million in State Supplemental Security Income (SSI) and Caretaker Supplement benefits to approximately 100,000 beneficiaries in Wisconsin. The Division of Supportive Living has requested a study to determine if a debit card system would be more cost effective than the current program. The evaluation would address the question: Is the current process cost effective from the perspectives of management, postage and loss costs, or would distribution of all payments via debit card be more efficient, less expensive, and pose less risk?

This evaluation will be conducted by Office of Strategic Finance Evaluation Section staff. A completion date for this evaluation will be specified when the study design is finalized.

Medicaid Programs

BadgerCare

The purpose of this evaluation is to determine the effectiveness of BadgerCare, a health insurance program that provides health insurance to families with incomes below 185% of the federal poverty level (FPL). The evaluation will measure the program's success in reducing the number and percentage of children that are uninsured and in improving the health of low-income families with children. The evaluation will also study what effect the BadgerCare program has had on the private insurance market.

Office of Strategic Finance Evaluation Section staff is conducting this evaluation in cooperation with staff from the Division of Health Care Financing. The evaluation will be completed in September of 2004.

Chronic Disease Aids Program

The Wisconsin Chronic Disease Aids Program provides payments for chronic renal disease, adult cystic fibrosis and hemophilia home care supplies. It is the payer of last resort for these programs. A majority of program expenditures are in the Chronic Renal Disease program. Caseloads and expenditures have grown in all three programs, but no additional funding was provided for the program in the most recent budget. This evaluation is planned to learn about the persons who receive assistance through the program and the impact of program services. The evaluation will describe the other health payment sources being used and the persons who receive assistance from the program. The description of the persons who receive assistance from the program will focus on issues such as family size, the point in their disease that they become eligible, how long they are on the program and outcome of their disease.

Public Health Programs

AIDS Prevention

The Division of Public Health will identify a small number of projects for a formal evaluation of project effectiveness by the spring of 2001. This evaluation is being conducted in response to the Legislative Audit Bureau review of prevention programs administered by DHFS and in response to evaluation requirements of the federal Centers for Disease Control (CDC) which is a primary funding source for AIDS prevention programs in Wisconsin. The CDC requires that grantees receiving at least \$1 million in cooperative agreement funding report on the results of an outcome evaluation of at least one intervention in September 2003.

Outcome evaluation information will also be available after 2002 from the Project for HIV-Infected Persons (PHIP). This is a CDC-funded demonstration grant.

AIDS Insurance Program

The AIDS Insurance Program was initiated by 1989 Wisconsin Act 336. Act 336 required the Department to establish a program to pay the health insurance premiums of people enrolled in an insurance continuation program who lost their job or reduced the number of hours they worked due to illness caused by an HIV infection. The AIDS Insurance program subsequently was expanded to cover self-employed persons. The purpose of the program is to help reduce Medicaid expenditures and to help assure access to health care for HIV infected people. An evaluation of the program conducted by the Office of Strategic Finance in 1992 found that the program did increase access to health care for people with HIV and that it saves the Medicaid program over six dollars for every dollar spent on the insurance subsidy. This evaluation is planned to determine if the expanded program also increases access to health care and if it is cost effective. The evaluation may also include the AIDS Drug Program.

Childhood Lead Poison Prevention Program

The purpose of this evaluation is to assess the effectiveness of the Wisconsin Childhood Lead Poison Prevention Program (WCLPPP) in reducing blood lead levels among poisoned children, and in re-mediating housing with lead hazards. The study will also document the number and rate at which children are screened for elevated blood lead levels, and the incidence of poisoning among children who have been screened. WCLPPP staff is conducting the evaluation with consultation from the Office of Strategic Finance. The evaluation will be completed in mid 2001.

MCH Block Grant Program

The purpose of this evaluation is to assess the effectiveness of the prevention component of the Maternal and Child Health (MCH) program in improving health outcomes of the mothers and children served by projects under MCH funding. This study will analyze two selected local MCH projects—Outagamie County and Sauk County public health departments—in providing/assuring comprehensive health care for children birth to 21 and in protecting them from vaccine- preventable illnesses. This preventive health service category is one of the four primary themes identified for Wisconsin's MCH program under the Division of Public Health consolidated contract with local departments of public health.

Division of Public Health staff is conducting this evaluation. Office of Strategic Finance Evaluation Section staff is providing technical assistance related to the study. The evaluation will be completed in June 2002.

Milwaukee Family Project/Target on Prevention Pilot

The purpose of this evaluation is to assist the divisions of Public Health, Health Care Financing, and Children and Family Services to determine if the Milwaukee Family Project/Target on Prevention (MFP/TOP) Program is effective in improving child welfare through reduced child abuse and neglect. TOP is a geographically focused (within Milwaukee) and more intensive pilot version of the Milwaukee Family Project. The evaluation will assess whether home visiting has reduced child abuse and neglect and out-of-home placements, improved family functioning, enhanced child development, improved parenting, improved the health status of children and reduced repeat pregnancies.

The Milwaukee Planning Council for Health and Human Services will conduct the evaluation. A completion date for the study will be established when evaluation plans are finalized.

Prevention of Child Abuse and Neglect (POCAN)

The purpose of this evaluation is to determine the effectiveness of the Prevention of Child Abuse and Neglect (POCAN) home visitation program that was established in 1999 under authorization of 1997 Wisconsin Act 293. The POCAN program serves first-time

Medicaid parents in nine counties (Brown, Door, Fond du Lac, Manitowoc, Marathon, Portage, Vernon, Waukesha and Waupaca) and one tribe (Lac Courte Oreilles). The enacting legislation for POCAN mandates that the Department conduct an evaluation of the home visiting program. The study will evaluate the effectiveness of the program in reducing child abuse, neglect and out-of-home placements, and improving the health of the child and the functioning of the family.

Office of Strategic Finance Evaluation Section staff is conducting this evaluation. An interim report was issued in early 2001, and the evaluation will be completed in January of 2003.

Women, Infants and Children Program

This evaluation will focus on two separate studies of the Women, Infants and Children (WIC) Program. The WIC program provides nutritious foods, nutrition information and referrals to other health and nutrition programs. The Wisconsin program serves 104,000 low to moderate income pregnant and breastfeeding women, new mothers, infants and children each month. The first study will focus on the possibilities for improving WIC. At the 25th year anniversary of the program WIC staff undertook a review of the program designed to highlight the things that are working well and to consider what things might be important in moving into the next years. Data were collected from current WIC participants, former participants who had dropped out of the program, and persons eligible for WIC but not participating. This data will be analyzed in order to assess opportunities for the future. The second study will compare WIC participants to mothers who did not participate in WIC on a number of outcome variables, including birth weight of the infants. Comparisons will also be made between longer and shorter-term WIC participants. In a related effort, information the program has compiled relevant to changes in caseload size over time will also be analyzed.

Office of Strategic Finance Evaluation Section staff is conducting this evaluation. It is expected that study efforts will be completed by the fall of 2001.

Completed Evaluation Studies

This section contains a complete listing of all evaluations that have been conducted by the Office of Strategic Finance Evaluation Section since the section was created in 1979. Copies of these reports may be obtained by contacting the Office of Strategic Finance, Evaluation Section. A summary of recently completed evaluation reports is also available at the OSF Evaluation Section web site. It describes the purpose of each study, how the study was conducted, key findings, and uses of the information obtained.

<http://www.dhfs.state.wi.us/aboutDHFS/osf/Evaluation/osf-eval.htm>

Evaluations Conducted by DHFS Office of Strategic Finance Evaluation Unit

SUPPORTIVE LIVING

Bureau for the Blind Consumer Independence Survey (May, 2001)

Human Resources Development Project (June, 1995)

Human Resources Development Project (Interim Evaluation) (May, 1993)

1992 Evaluation of Grants for Services to Persons with Epilepsy (February, 1993)

Final Report on the 1989 Act 122 Funded Multi-Disciplinary Prevention and Treatment Team for Cocaine Families (July, 1992)

1991 Evaluation of Grants for Services to Persons with Epilepsy (February, 1992)

Outcome Evaluation of the Integrated Service Pilot Programs for Children with Severe Disabilities (December, 1991)

1990 Evaluation of Grants for Services to Persons with Epilepsy (February, 1991)

An Evaluation of Grants for Services to Persons with Epilepsy (February, 1990)

A Study of Annual Guardian of the Person Reports Required Under s.880.38(3) (February, 1990)

Elderly Abuse Study (January, 1986)

Elderly Nutrition Study (February, 1983)

Recommendations for Evaluating Community Support Programs for the Chronically Mentally Ill (November, 1981)

Community-Based Residential Facilities Evaluation (December, 1980)

CHILDREN AND FAMILY SERVICES

Adolescent Pregnancy Prevention and Adolescent Parenting Programs (Analysis of 1998-1999 Participant Data) (February, 2001)

Evaluation of the Adoption Records Search Program (May, 1996)

Foster Parents in Wisconsin: Recruitment, Retention & Training (November, 1991)

Adoption Information Center (Use & Satisfaction) (September, 1991)

Before and After School Day Care Programs (September, 1991)

Special Needs Adoption Purchase of Service: Final Evaluation Report (May, 1991)

Special Needs Adoption Purchase of Service: Interim Report (October, 1990)

Report on the Alcohol and Other Drug Abuse Child Care Pilot Program (December, 1989)

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